

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Pacific Century Financial Corp. Special Political Education Committee

ADDRESS (number and street) 130 Merchant Street, Ste. 1180
 Check if different than previously reported. (ACC)
Honolulu HI 96813

2. **FEC IDENTIFICATION NUMBER** C00025668
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Mr. Robert Crowell
Signature of Treasurer Electronically Filed by Mr. Robert Crowell Date 07 11 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Pacific Century Financial Corp. Special Political Education Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		42708.80
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	30863.80									
(c) Total Receipts (from Line 19)	7010.00	14275.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37873.80	56983.80								
7. Total Disbursements (from Line 31)	12800.00	31910.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	25073.80	25073.80								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Pacific Century Financial Corp. Special Political Education Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4275.00	6675.00
(i) Itemized (use Schedule A)	2535.00	7400.00
(ii) Unitemized	6810.00	14075.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6810.00	14075.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	200.00	200.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7010.00	14275.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7010.00	14275.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7700.00	12510.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	5100.00	19400.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12800.00	31910.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	12800.00	31910.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	6810.00	14075.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6810.00	14075.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

A. Full Name (Last, First, Middle Initial) Mr. William Barton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9601	
City State Zip Code Honolulu HI 96846-6000		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Pacific Century Trust Senior Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Mr. Peter Biggs		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9603	
City State Zip Code Honolulu HI 96846		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Executive Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms Teresa Cronkrite		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 949 Kamokila Blvd.		Transaction ID: SA11A1.9608	
City State Zip Code Kapolei HI 96707		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Senior Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Ms. Kathleen Fujihara-Chong		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9611	
City State Zip Code Honolulu HI 96846-6000		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Executive Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mr. Wayne Hamano		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9613	
City State Zip Code Honolulu HI 96846-6000		Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Executive Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Mr. Alexander Jamile		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9616	
City State Zip Code Honolulu HI 96846-6000		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Senior Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	405.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Ms. Janet Katakura		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9617	
City Honolulu	State HI	Amount of Each Receipt this Period 150.00	
Zip Code 96846-6000			
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Century Trust	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Mr. Richard Keene		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9618	
City Honolulu	State HI	Amount of Each Receipt this Period 450.00	
Zip Code 96846-6000			
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Vice Chairman & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) C. Mr. Thomas Koide		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9619	
City Honolulu	State HI	Amount of Each Receipt this Period 150.00	
Zip Code 96846-6000			
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Allan Landon		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9620	
City Honolulu	State HI	Amount of Each Receipt this Period 900.00	
Zip Code 96846-6000			
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Chairman, CEO & President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00		

Full Name (Last, First, Middle Initial) B. Mr. Ronald Leach		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9622	
City Honolulu	State HI	Amount of Each Receipt this Period 150.00	
Zip Code 96846-6000			
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Janet Mason		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9626	
City Honolulu	State HI	Amount of Each Receipt this Period 150.00	
Zip Code 96846			
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Thomas McCurdy		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9631	
City Honolulu	State HI	Zip Code 96846-6000	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Stephanie Saito		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9640	
City Honolulu	State HI	Zip Code 96846	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Mary Sellers		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9642	
City Honolulu	State HI	Zip Code 96846-6000	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

A. Full Name (Last, First, Middle Initial)
Mr. Joji Seta

Mailing Address PO Box 2900

City Honolulu State HI Zip Code 96846-6000

FEC ID number of contributing federal political committee. **C**

Name of Employer Bank of Hawaii Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.9643

Amount of Each Receipt this Period
 150.00

B. Full Name (Last, First, Middle Initial)
Ms Donna Tanoue

Mailing Address PO Box 2900

City Honolulu State HI Zip Code 96846

FEC ID number of contributing federal political committee. **C**

Name of Employer Bank of Hawaii Occupation Vice Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.9649

Amount of Each Receipt this Period
 450.00

C. Full Name (Last, First, Middle Initial)
Mr. David Thomas

Mailing Address P.O. Box 2900

City Honolulu State HI Zip Code 96846-6000

FEC ID number of contributing federal political committee. **C**

Name of Employer Bank of Hawaii Occupation Vice Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.9650

Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 20	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

A. Full Name (Last, First, Middle Initial)
Mr. Curtis Tom

Mailing Address 4455 Rice St.

City State Zip Code
Lihue HI 96766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bank of Hawaii Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.9651

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	4275.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 20
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Galen Fox		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 411 Hobron Lane, #3911		Transaction ID: SA16.9593
City Honolulu State HI Zip Code 96815	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Refunded contribution	
Name of Employer State of Hawaii Occupation Representative	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) B. Mr. Brian Schatz		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1716 Keeaumoku St. #602		Transaction ID: SA16.9594
City Honolulu State HI Zip Code 96822	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Refunded contribution	
Name of Employer State of Hawaii Occupation State Representative	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 100.00		

SUBTOTAL of Receipts This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	200.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Neil Abercrombie		Transaction ID: SB23.9583 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1517 Kapiolani Blvd.		Amount of Each Disbursement this Period 1000.00	
City Honolulu State HI Zip Code 96814	Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: HI District: 1	

Full Name (Last, First, Middle Initial) B. Mr. Neil Abercrombie		Transaction ID: SB23.9584 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1517 Kapiolani Blvd.		Amount of Each Disbursement this Period 3200.00	
City Honolulu State HI Zip Code 96814	Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: HI District: 1	

Full Name (Last, First, Middle Initial) C. Mr. Ed Case		Transaction ID: SB23.9582 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address P.O. Box 4618		Amount of Each Disbursement this Period 500.00	
City Kaneohe State HI Zip Code 96744	Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: HI District: 2	

SUBTOTAL of Disbursements This Page (optional) ▶	4700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Clayton Hee		Transaction ID: SB23.9588 Date of Disbursement MM / DD / YYYY 06 / 14 / 2006	
Mailing Address 81 South Hotel Street Suite 308		Amount of Each Disbursement this Period 2000.00	
City Honolulu State HI Zip Code 96813	Purpose of Disbursement <input type="text"/>		
Candidate Name <input type="text"/>		Category/Type <input type="text"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Ron Menor		Transaction ID: SB23.9569 Date of Disbursement MM / DD / YYYY 04 / 14 / 2006	
Mailing Address 220 South King Street Suite 1770		Amount of Each Disbursement this Period 1000.00	
City Honolulu State HI Zip Code 96813	Purpose of Disbursement <input type="text"/>		
Candidate Name <input type="text"/>		Category/Type <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

TOTAL This Period (last page this line number only) ►

7700.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Jerry Chang		Transaction ID: SB29.9562 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6	
Mailing Address 265D Kekuanaoa Street		Amount of Each Disbursement this Period 100.00	
City Hilo State HI Zip Code 96720	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District:		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type	

Full Name (Last, First, Middle Initial) B. Mr. Donovan Dela Cruz		Transaction ID: SB29.9586 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address P.O. Box 860340		Amount of Each Disbursement this Period 200.00	
City Wahiawa State HI Zip Code 96786	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District:		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type	

Full Name (Last, First, Middle Initial) C. Mr. Will Espero		Transaction ID: SB29.9578 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 91-944 Waihua Place		Amount of Each Disbursement this Period 100.00	
City Ewa State HI Zip Code 96706	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 20		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Mufi Hannemann		Transaction ID: SB29.9579 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 98-718 Moanalua Rd., #401		Amount of Each Disbursement this Period 3000.00
City Pearl City State ID HI Zip Code 96782		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) B. Ms Paula Helfrich		Transaction ID: SB29.9571 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 10502		Amount of Each Disbursement this Period 100.00
City Hilo State ID HI Zip Code 96721-5502		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) C. Ms Sylvia Luke		Transaction ID: SB29.9566 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address P. O. Box 2804		Amount of Each Disbursement this Period 200.00
City Honolulu State ID HI Zip Code 96803		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 26	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

SUBTOTAL of Disbursements This Page (optional) ▶	3300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Michael Magaoay,		Transaction ID: SB29.9561 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6	
Mailing Address P.O. Box 977		Amount of Each Disbursement this Period 500.00	
City Waialua State HI Zip Code 96791	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 46	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ms. Barbara Marumoto		Transaction ID: SB29.9576 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address P. O. Box 2274		Amount of Each Disbursement this Period 100.00	
City Honolulu State HI Zip Code 96804	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 19	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mr. Blake Oshiro		Transaction ID: SB29.9565 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address P.O. Box 1473		Amount of Each Disbursement this Period 100.00	
City Aiea State HI Zip Code 96701	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 33	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Karl Rhoads		Transaction ID: SB29.9563 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address P.O. Box 27811		Amount of Each Disbursement this Period 100.00	
City Honolulu State HI Zip Code 96827-0811	Purpose of Disbursement Candidate Name Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Kameo Tanaka		Transaction ID: SB29.9574 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 140 Uwapo Road Suite 28-202		Amount of Each Disbursement this Period 100.00	
City Kihei State HI Zip Code 96753	Purpose of Disbursement Candidate Name Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Brian Taniguchi		Transaction ID: SB29.9580 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 2140 Armstrong Street		Amount of Each Disbursement this Period 200.00	
City Honbolulu State HI Zip Code 96822	Purpose of Disbursement Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Clifton Tsuji,		Transaction ID: SB29.9573 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6	
Mailing Address 1382 Auahi Place		Amount of Each Disbursement this Period 200.00	
City Hilo State HI Zip Code 96720	Purpose of Disbursement Candidate Name Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Glenn Wakai		Transaction ID: SB29.9560 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6	
Mailing Address 1541 Ala Lani St.		Amount of Each Disbursement this Period 100.00	
City Honolulu State HI Zip Code 96819	Purpose of Disbursement Candidate Name Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 31	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

300.00

TOTAL This Period (last page this line number only)

5100.00